

POSITION	ID NO.	DATE
CLASSIFIER.		
EXAMINER	233	11-2-93
TYPIST	203	11/6/93
VERIFIER	314	11-18-93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
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Claim	Date
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected